POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.P.		7/20/99
.I.P.E. CLASSIFIER		6158	
F RMALITY REVIEW			

INDEX OF CLAIMS

BEST AVAILABLE COPY

Rejected
Allowed
– (Through numeral)... Canceled
÷ .... Restricted

N .... Non-elected
I .... Interference
A .... Appeal
0 .... Objected

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)